

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105406

FILED
Jun 25, 2009
Secretary of State

Entity Name: KLARAS REALTY ADVISORS, LLC

Current Principal Place of Business:

621 NORTHWEST 53RD STREET STE 240
BOCA RATON, FL 33487

New Principal Place of Business:

621 NORTHWEST 53RD STREET
SUITE 240
BOCA RATON, FL 33487

Current Mailing Address:

621 NORTHWEST 53RD STREET STE 240
BOCA RATON, FL 33487

New Mailing Address:

621 NORTHWEST 53RD STREET
SUITE 240
BOCA RATON, FL 33487

FEI Number: 26-3712931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA PA
1840 SOUTHWEST 22ND STREET 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ACKERMANN, JOHN H
Address: 621 NORTHWEST 53RD STREET STE 240
City-St-Zip: BOCA RATON, FL 33487

Title: S () Delete
Name: ACKERMANN, JOHN H
Address: 621 NORTHWEST 53RD STREET STE 240
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN H. ACKERMANN

MM

06/25/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date